

EXHIBIT N

From: Lester L. Levy [mailto:LLevy@wolfpopper.com]
Sent: Monday, November 24, 2008 3:16 PM
To: Lee, Alvin (Perkins Coie); Farzan, Farschad (Perkins Coie)
Cc: Rachel S. Black; Michele F. Raphael
Subject: Google - follow up on today's "meet and confer"

Counsel-

The following information supplements our meet and confer of earlier today:

- 1) With regard to plaintiff Howard Stern, we will redact and produce as highly confidential Schedule C to his tax returns, which contain the information relating to his business for which he advertised on AdWords. We have confirmed he has no additional records relating to his business.
- 2) With respect to Plaintiff CLRB Hanson, on August 13, 2004, there was a fire at the premises of CLRB Hanson Industries, which fire caused a total destruction of the premises, including business records. (I attach a copy of the report of the Fire Department.) Thus, we are informed no records exist prior to August 13, 2004. The company stopped doing business in November 2005. Plaintiff has made a thorough search of the locations where any records for the period subsequent to August 13, 2004 would be stored, and found no records, except for Schedules C for 2004 and 2005, which we will redact and produce as highly confidential. Plaintiff will make a final search by the end of this weekend to search even unlikely locations for documents. At the completion of that search, Plaintiff will have looked at all locations, both logical and illogical, for responsive documents. We will advise you by next week whether any responsive documents exist beyond what CLRB already produced.

Lester

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A	FDID * 62109	State * MN	Incident Date * MM 08 DD 13 YYYY 2004	Station 1	Incident Number * 04-0000534	Exposure * 000	<input type="checkbox"/> Delete <input type="checkbox"/> Change <input type="checkbox"/> No Activity	NFIRS -1 Basic
B	Location* <input type="checkbox"/> Check this box to indicate that the address for this incident is provided on the Wildland Plan Module in Section 8 "Alternative Location Specification". Use only for Wildland fires.							
	<input checked="" type="checkbox"/> Street address Number/Milepost 1430 Prefix C Street or Highway COUNTY ROAD C Street Type Suffix <input type="checkbox"/> Intersection <input type="checkbox"/> In front of <input type="checkbox"/> Rear of <input type="checkbox"/> Adjacent to <input type="checkbox"/> Directions Apt./Suite/Room City Roseville State MN Zip Code 55113 Cross street or directions, as applicable 							
C	Incident Type * 111 Building fire Incident Type 		E1 Date & Times Check boxes if dates are the same as Alarm Alarm * 08 13 2004 06:00:00 ARRIVAL required, unless canceled or did not arrive <input checked="" type="checkbox"/> Arrival * 08 13 2004 06:07:00 CONTROLLED Optional, except for Wildland fires <input checked="" type="checkbox"/> Controlled 08 13 2004 06:07:00 LAST UNIT CLEARED, required except for wildland fires <input checked="" type="checkbox"/> Last Unit Cleared 08 13 2004 08:00:00				E2 Shift & Alarms Local Option <input type="checkbox"/> 01 B3 Shift or Alarm District Platform 	
D	Aid Given or Received* 1 <input type="checkbox"/> Mutual aid received 2 <input type="checkbox"/> Automatic aid recv. 3 <input type="checkbox"/> Mutual aid given 4 <input type="checkbox"/> Automatic aid given 5 <input type="checkbox"/> Other aid given N <input checked="" type="checkbox"/> None Their FDID Their State Their Incident Number 		E3 Special Studies Local Option Special Study ID# Special Study Value 					
F	Actions Taken * 12 Salvage & overhaul Primary Action Taken (1) 64 Shut down system Additional Action Taken (2) 66 Remove water Additional Action Taken (3)		G1 Resources * <input type="checkbox"/> Check this box and skip this section if an Apparatus or Personnel form is used. Apparatus 0005 Personnel 0018 Suppression EMS Other <input type="checkbox"/> Check box if resource counts include aid received resources.		G2 Estimated Dollar Losses & Values LOSSES: Required for all fires if known. Optional for non fires. None Property \$ 300 , 000 Contents \$ 200 , 000 PRE-INCIDENT VALUE: Optional Property \$ 002 , 500 , 000 Contents \$ 002 , 000 , 000			
Completed Modules <input checked="" type="checkbox"/> Fire-2 <input checked="" type="checkbox"/> Structure-3 <input type="checkbox"/> Civil Fire Cas.-4 <input type="checkbox"/> Fire Serv. Cas.-5 <input type="checkbox"/> EMS-6 <input type="checkbox"/> HazMat-7 <input type="checkbox"/> Wildland Fire-8 <input type="checkbox"/> Apparatus-9 <input type="checkbox"/> Personnel-10 <input type="checkbox"/> Arson-11		H1* Casualties <input type="checkbox"/> None Deaths Injuries Fire Service Civilian H2 Detector Required for Confined Fires. 1 <input type="checkbox"/> Detector alerted occupants 2 <input type="checkbox"/> Detector did not alert them U <input type="checkbox"/> Unknown		H3 Hazardous Materials Release N <input checked="" type="checkbox"/> None 1 <input type="checkbox"/> Natural Gas: slow leak, no evacuation or HazMat actions 2 <input type="checkbox"/> Propane gas: 40 lb. tank (as in home FPD grill) 3 <input type="checkbox"/> Gasoline: vehicle fuel tank or portable container 4 <input type="checkbox"/> Kerosene: fuel burning equipment or portable storage 5 <input type="checkbox"/> Diesel fuel/fuel oil: vehicle fuel tank or portable 6 <input type="checkbox"/> Household solvents: home/office spill, cleanup only 7 <input type="checkbox"/> Motor oil: from engine or portable container 8 <input type="checkbox"/> Paint: from paint cans totaling < 55 gallons 0 <input type="checkbox"/> Other: special HazMat actions required or spill > 55 gal. Please complete the HazMat form		I Mixed Use Property NN <input type="checkbox"/> Not Mixed 10 <input type="checkbox"/> Assembly use 20 <input type="checkbox"/> Education use 33 <input type="checkbox"/> Medical use 40 <input type="checkbox"/> Residential use 51 <input type="checkbox"/> Row of stores 53 <input type="checkbox"/> Enclosed mall 58 <input type="checkbox"/> Bus. & Residential 59 <input type="checkbox"/> Office use 60 <input checked="" type="checkbox"/> Industrial use 63 <input type="checkbox"/> Military use 65 <input type="checkbox"/> Farm use 00 <input type="checkbox"/> Other mixed use		
J	Property Use* Structures 131 <input type="checkbox"/> Church, place of worship 161 <input type="checkbox"/> Restaurant or cafeteria 162 <input type="checkbox"/> Bar/Tavern or nightclub 213 <input type="checkbox"/> Elementary school or kindergarten 215 <input type="checkbox"/> High school or junior high 241 <input type="checkbox"/> College, adult education 311 <input type="checkbox"/> Care facility for the aged 331 <input type="checkbox"/> Hospital Outside 124 <input type="checkbox"/> Playground or park 655 <input type="checkbox"/> Crops or orchard 669 <input type="checkbox"/> Forest (timberland) 807 <input type="checkbox"/> Outdoor storage area 919 <input type="checkbox"/> Pump or sanitary landfill 931 <input type="checkbox"/> Open land or field		341 <input type="checkbox"/> Clinic, clinic type infirmary 342 <input type="checkbox"/> Doctor/dentist office 361 <input type="checkbox"/> Prison or jail, not juvenile 419 <input type="checkbox"/> 1-or 2-family dwelling 429 <input type="checkbox"/> Multi-family dwelling 439 <input type="checkbox"/> Rooming/boarding house 449 <input type="checkbox"/> Commercial hotel or motel 459 <input type="checkbox"/> Residential, board and care 464 <input type="checkbox"/> Dormitory/barracks 519 <input type="checkbox"/> Food and beverage sales 936 <input type="checkbox"/> Vacant lot 938 <input type="checkbox"/> Graded/care for plot of land 946 <input type="checkbox"/> Lake, river, stream 951 <input type="checkbox"/> Railroad right of way 960 <input type="checkbox"/> Other street 961 <input type="checkbox"/> Highway/divided highway 962 <input type="checkbox"/> Residential street/driveway		539 <input type="checkbox"/> Household goods, sales, repairs 579 <input type="checkbox"/> Motor vehicle/boat sales/repair 571 <input type="checkbox"/> Gas or service station 599 <input type="checkbox"/> Business office 615 <input type="checkbox"/> Electric generating plant 629 <input type="checkbox"/> Laboratory/science lab 700 <input checked="" type="checkbox"/> Manufacturing plant 819 <input type="checkbox"/> Livestock/poultry storage (barn) 882 <input type="checkbox"/> Non-residential parking garage 891 <input type="checkbox"/> Warehouse 981 <input type="checkbox"/> Construction site 984 <input type="checkbox"/> Industrial plant yard Lookup and enter a Property Use code only if you have NOT checked a Property Use box: Property Use 700 Manufacturing, processing NFIRS-1 Revision 03/11/99			

1 Person/Entity Involved

Local Option

Business name (if applicable)

Area Code

Phone Number

☐ Check this box if same address as incident location. Then skip the three duplicate address lines.

Mr., Mr., Mrs. First Name MI Last Name Suffix
Number Prefix Street or Highway Street Type Suffix
Post Office Box Apt./Suite/Room City
State Zip Code

☐ More people involved? Check this box and attach Supplemental Forms (NFIRS-18) as necessary

2 Owner

☐ Same as person involved? Then check this box and skip the rest of this section.

Local Option

Business name (if applicable)

Area Code

Phone Number

☒ Check this box if same address as incident location. Then skip the three duplicate address lines.

Mr., Mr., Mrs. First Name MI Last Name Suffix
Number Prefix Street or Highway Street Type Suffix
Post Office Box Apt./Suite/Room City
State Zip Code

Remarks

Local Option

Dispatch alerted the Chief's of a fire out at 1430 County road C. Stated that employee arrived for work and found sprinklers put out a kitchen fire. Myself, 940 and Chief 100 responded. Upon arrival found a fire in the kitchen that was put out by the sprinkler system. Appeared the sprinklers were running for several hours. Had Station 1 and 3 respond to assist with water removal. Xcel gas and electric responded to shut off power and gas.

Authorization

100

Officer in charge ID

O'Neill, Timothy

Signature

AFC

Position or rank

IC

Assignment

08

Month

13

Day

2004

Year

check

by IC

time

A charge

A charge

☒ 100

Officer Member making report ID

O'Neill, Timothy

Signature

AFC

Position or rank

IC

Assignment

08

Month

13

Day

2004

Year